24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
United We Can	C C00523621
check if 24-hour report 48-hour report New report Amends report filed	on Man / Dab / Yayayay
Full Name of Payee SEIU Florida State Council	Date of Public Distribution/Dissemination
Mailing Address 14645 NW 77th Ave	10 15 2016
Suite 201	Amount
City State Zip Code	266.71
Hialeah FL 33014	Transaction ID : D368251 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing Services Category/ Type 001	10 15 / 2016
Name of Federal Candidate Support Office	e Sought: X House District: 13
CRIST, CHARLIE JOSEPH, , ,	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	rrsement For: Primary X General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
SEIU Florida State Council	10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 14645 NW 77th Ave	Amount
Suite 201	Amount
City State Zip Code	2133.68
Hialeah FL 33014	Transaction ID : D368252 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing Services Category/ Type 001	10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	e Sought: House District:
TRUMP, DONALD J, , ,	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2400.39
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•
Hudson, Gerald, , , [Electronically Filed] Date	0 16 2016
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	TT EXI EITE	TOTILO		PAGE 2 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			F	EC IDENTIFICATION NUMBER ▼
United We Can				C C00523621
Check if 24-hour report 🗴 48-hour report	X New rep	port Amends rep	ort filed on	M / D = D / Y = Y = Y
Full Name of Payee SEIU Florida State Council			M	Public Distribution/Dissemination
Mailing Address 14645 NW 77th Ave			1	0 15 2016
Suite 201				
City Hialeah	State FL	Zip Code 33014		355.61 ction ID : D368253 Disbursement or Obligation
Purpose of Expenditure Canvassing Services		Category/ Type 001	М	0 / 15 / 2016
Name of Federal Candidate		✗ Support	Office Sought:	House District:
CLINTON, HILLARY RODHAM, , ,		Oppose	* Presider	
Calendar Year-To-Date Per Election for Office Sought	7	1561423.32	Disbursement 2016 Oth	For: Primary x General er (specify) ▶
Full Name of Payee The Pivot Group			M	Public Distribution/Dissemination
Mailing Address 1720 I Street, NW Suite 550			Amoun	
City	State	Zip Code		55976.10
Washington Purpose of Expenditure	DC	20006		tion ID: D368248 Disbursement or Obligation
Voter Canvass Literature		Category/ Type 006		0 14 2016
Name of Federal Candidate		Support	Office Sought:	House District:
TRUMP, DONALD J, , ,		x Oppose	X Presider	nt Senate State:
Calendar Year-To-Date Per Election for Office Sought	7	1561423.32	Disbursement 2016 Oth	For: Primary X General ner (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditu	ıres		▶	56331.71
(b) SUBTOTAL of Unitemized Independent Expendent	ditures		··· >	7
(c) TOTAL Independent Expenditures			··· •	7 7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or it	date or authorized			
Hudson, Gerald, , ,	[Electron	nically Filed] Date	e 10	16 / Y = Y = Y = Y = Y
Signature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	JEINT EXI EIN	DITORIES	PAGE 3 OF 3 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼		
United We Can			C C00523621		
Check if 24-hour report X 48-hour report	New r	eport Amends repo	rt filed on		
Full Name of Payee			Date of Public Distribution/Dissemination		
The Pivot Group			10 14 2016		
Mailing Address 1720 I Street, NW Suite 550			Amount		
City	State	Zip Code	44699.68		
Washington	DC	20006	Transaction ID : D368249 Date of Disbursement or Obligation		
Purpose of Expenditure Voter Canvass Literature		Category/ Type 006	10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate		x Support	Office Sought: House District:		
CLINTON, HILLARY RODHAM, , ,		Oppose	resident Senate State:		
Calendar Year-To-Date Per Election for Office Sought		1561423.32	Disbursement For:		
Full Name of Payee			Date of Public Distribution/Dissemination		
The Pivot Group			10 14 2016		
Mailing Address 1720 I Street, NW Suite 550	0		Amount		
City	State	Zip Code	9931.68		
Washington	DC	20006	Transaction ID : D368250 Date of Disbursement or Obligation		
Purpose of Expenditure Voter Canvass Literature		Category/ Type 006	10 14 2016		
Name of Federal Candidate		x Support	Office Sought: House District:		
BENNET, MICHAEL F, , ,		Oppose	President Senate State: CO		
Calendar Year-To-Date Per Election for Office Sought		9931.68	Disbursement For:		
(a) SUBTOTAL of Itemized Independent Exper	nditures		54631.36		
(b) SUBTOTAL of Unitemized Independent Exp	penditures		>		
(c) TOTAL Independent Expenditures			113363.46		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Hudson, Gerald, , ,	[Electr	conically Filed] Date	10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
· ·					